

**INSPECTIONS AND APPEALS DEPARTMENT[481]**

**Adopted and Filed**

**Rule making related to design and construction standards for nursing facilities**

The Inspections and Appeals Department hereby amends Chapter 61, “Minimum Physical Standards for Nursing Facilities,” Iowa Administrative Code.

*Legal Authority for Rule Making*

This rule making is adopted under the authority provided in Iowa Code sections 10A.104(5) and 135C.14.

*State or Federal Law Implemented*

This rule making implements, in whole or in part, Iowa Code sections 10A.104(5) and 135C.14.

*Purpose and Summary*

This rule making adopts the 2018 Guidelines for Design and Construction of Residential Health, Care, and Support Facilities, published by the Facility Guidelines Institute (FGI) as the minimum design and construction standards for nursing facilities licensed under Iowa Code chapter 135C. The design requirements and recommendations presented in the guidelines have moved away from institutional models to foster development of facilities offering person-centered living environments that support a variety of care models and add to the quality of life for residents. The guidelines help organizations and designers create homelike physical environments that support positive resident outcomes.

Currently, Chapter 61 refers to the 2010 edition of the guidelines for nursing facilities. Adoption of this rule making provides consistency in the design and construction standards of nursing facilities licensed pursuant to Iowa Code chapter 135C. Additionally, most architects and engineers use the most current edition of the FGI Guidelines when designing new facilities.

The Facility Guidelines Institute is an independent, not-for-profit organization dedicated to developing guidance for the planning, design, and construction of hospitals, outpatient facilities, and residential health, care, and support facilities. The FGI updates its guidelines every four years to reflect the changing needs of residents being cared for in nursing facilities.

*Public Comment and Changes to Rule Making*

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on December 5, 2018, as **ARC 4162C**. No public comments were received. No changes from the Notice have been made.

*Adoption of Rule Making*

The State Board of Health reviewed the proposed amendments at its November 14, 2018, meeting, and subsequently approved this rule making at its January 9, 2019, meeting. This rule making was adopted by the Department on January 9, 2019.

*Fiscal Impact*

This rule making has no fiscal impact to the State of Iowa. The Department does not believe that the proposed amendments impose any financial hardship on any regulated entity, body, or individual.

*Jobs Impact*

After analysis and review of this rule making, no impact on jobs has been found.

### *Waivers*

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to 481—Chapter 6.

### *Review by Administrative Rules Review Committee*

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

### *Effective Date*

This rule making will become effective on March 6, 2019.

The following rule-making actions are adopted:

ITEM 1. Amend subrule 61.2(3) as follows:

**61.2(3)** Construction shall be in accordance with the standards set forth in ~~Part 4.2 and other applicable provisions of the Guidelines for Design and Construction of Health Care Facilities, 2010 edition~~ the Guidelines for Design and Construction of Residential Health, Care, and Support Facilities, 2018 edition, published by the Facility Guidelines Institute.

ITEM 2. Amend paragraph **61.6(1)“c”** as follows:

c. Projects shall be constructed in compliance with the standards set forth in ~~Part 4.2 and other applicable provisions of the Guidelines for Design and Construction of Health Care Facilities, 2010 edition~~ the Guidelines for Design and Construction of Residential Health, Care, and Support Facilities, 2018 edition, published by the Facility Guidelines Institute.

ITEM 3. Amend subrule 61.6(6) as follows:

**61.6(6) Lighting requirements.** Light shall be provided in the areas of the building as required in ~~Table 4.1-3 of the Guidelines for Design and Construction of Health Care Facilities, 2010 edition~~ the Guidelines for Design and Construction of Residential Health, Care, and Support Facilities, 2018 edition, published by the Facilities Guidelines Institute.

ITEM 4. Amend rule 481—61.9(135C), introductory paragraph, as follows:

**481—61.9(135C) Specialized unit or facility for persons with chronic confusion or a dementing illness (CCDI unit or facility).** A CCDI unit or facility shall be designed in accordance with ~~Section 4.2-2.2.3.2 and other applicable provisions of the Guidelines for Design and Construction of Health Care Facilities, 2010 edition~~ the standards set forth in the Guidelines for Design and Construction of Residential Health, Care, and Support Facilities, 2018 edition, ~~produced by~~ published by the Facility Guidelines Institute. The following provisions shall also apply:

[Filed 1/9/19, effective 3/6/19]

[Published 1/30/19]

EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 1/30/19.